

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000059869

1. Entity Name
SNEDDON CONSTRUCTION CORPORATION



Principal Place of Business
1908 SW 6TH AVE
OKEECHOBEE, FL 34974

Mailing Address
PO BOX 1520
OKEECHOBEE, FL 34973

FILED
Apr 09, 2008 08:00 AM
Secretary of State



04012008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1113033	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SNEDDON, ROBERT C
1908 SW 6TH AVE
OKEECHOBEE, FL 34974

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when remitting)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

UD00000887419
04/21/08-80019-016 150.00

10. OFFICERS AND DIRECTORS

TITLE D
NAME SNEDDON, ROBERT C
STREET ADDRESS 1908 SW 6TH AVE
CITY-ST-ZIP OKEECHOBEE, FL 34974

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Robert C. Sneddon* **4/7/08** **863-763-0740**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #